

NAIC BLANKS (E) WORKING GROUP

Blanks Agenda Item Submission Form

<p align="right">DATE: <u>3/12/2025</u></p> <p>CONTACT PERSON: <u>Kris DeFrain</u></p> <p>TELEPHONE: <u>816-783-8229</u></p> <p>EMAIL ADDRESS: <u>kdefrain@naic.org</u></p> <p>ON BEHALF OF: <u>Casualty Actuarial and Statistical (C) Task Force</u></p> <p>NAME: <u>Christian Citarella</u></p> <p>TITLE: <u>Chair of CASTF</u></p> <p>AFFILIATION: <u>New Hampshire Insurance Department</u></p> <p>ADDRESS: _____</p>	<p align="center">FOR NAIC USE ONLY</p> <p>Agenda Item # <u>2025-07BWG</u></p> <p>Year <u>2025</u></p> <p>Changes to Existing Reporting <input checked="" type="checkbox"/> [X]</p> <p>New Reporting Requirement <input type="checkbox"/> []</p> <hr/> <p align="center">REVIEWED FOR ACCOUNTING PRACTICES AND PROCEDURES IMPACT</p> <p>No Impact <input checked="" type="checkbox"/> [X]</p> <p>Modifies Required Disclosure <input type="checkbox"/> []</p> <p>Is there data being requested in this proposal which is available elsewhere in the Annual/Quarterly Statement? <input type="checkbox"/> [No]</p> <p><i>***If Yes, complete question below***</i></p> <p align="center">DISPOSITION</p> <p><input type="checkbox"/> [] Rejected For Public Comment</p> <p><input type="checkbox"/> [] Referred To Another NAIC Group</p> <p><input type="checkbox"/> [] Received For Public Comment</p> <p><input type="checkbox"/> [] Adopted Date _____</p> <p><input type="checkbox"/> [] Rejected Date _____</p> <p><input type="checkbox"/> [] Deferred Date _____</p> <p><input type="checkbox"/> [] Other (Specify) _____</p>
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BLANK(S) TO WHICH PROPOSAL APPLIES

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> [X] ANNUAL STATEMENT | <input checked="" type="checkbox"/> [X] INSTRUCTIONS | <input type="checkbox"/> [] CROSSCHECKS |
| <input type="checkbox"/> [] QUARTERLY STATEMENT | <input type="checkbox"/> [] BLANK | |
| <input type="checkbox"/> [] Life, Accident & Health/Fraternal | <input type="checkbox"/> [] Separate Accounts | <input type="checkbox"/> [] Title |
| <input checked="" type="checkbox"/> [X] Property/Casualty | <input type="checkbox"/> [] Protected Cell | <input type="checkbox"/> [] Other _____ |
| <input type="checkbox"/> [] Health | <input type="checkbox"/> [] Health (Life Supplement) | <input type="checkbox"/> [] Life (Health Supplement) |

Anticipated Effective Date: Annual 2025

IDENTIFICATION OF ITEM(S) TO CHANGE

Update Schedule P with editorial revisions exposed at the Casualty Actuarial and Statistical (C) Task Force.

REASON, JUSTIFICATION FOR AND/OR BENEFIT OF CHANGE**

See Next page

*****IF THE DATA IS AVAILABLE ELSEWHERE IN THE ANNUAL/QUARTERLY STATEMENT, PLEASE NOTE WHY IT IS REQUIRED FOR THIS PROPOSAL*****

NAIC STAFF COMMENTS

Comment on Effective Reporting Date: _____

Other Comments:

** This section must be completed on all forms.

REASON, JUSTIFICATION FOR AND/OR BENEFIT OF CHANGE**

Proposed Schedule P Instruction Changes

- As was done in Part 7, add numbering to paragraphs to aid communication when referring to the instructions.
- Continue to use the word “prior” to describe the row of 10+ accident years; change to use the word “previous” when referring to “one or more years ago.” Use the terminology of “prior row” and only use “line” when referring to line of business.
- Eliminate any instructions that apply to business prior to 2000.
- Use the abbreviation of the loss adjustment expenses (DCC and A&O) instead of spelling out each time.
- While we tend to refer to the tables as “accident year” triangles, the tables are labeled as “incurred year” because the trigger for coverage is not always the accident year. Therefore, “accident year” is changed to “incurred year” throughout the document to avoid the confusion.
- A couple of paragraphs were moved in the first page of instructions for better flow.
- Moved pooling paragraphs to the overall instruction page (and not in Part 1 only). Same with line of business information.
- Eliminate references to Exhibit B, which was deleted when all lines of business began to report 10 years of data (vs. 2 years of data for some lines).
- Created more “The Prior Row” sections.

ANNUAL STATEMENT INSTRUCTIONS –PROPERTY

SCHEDULE P

1. There are seven parts and the interrogatories within Schedule P. Part 1 provides detailed information on losses and loss expenses. Part 2 provides a history of incurred losses and defense & cost containment (DCC) expenses. Part 3 provides a history of loss and ~~defense & cost~~DCC ~~containment~~ payments. Part 4 provides a history of bulk and incurred but not reported (IBNR) reserves. Part 5 provides a history of claims. Part 6 provides a history of premiums earned. Part 7 provides a history of loss sensitive contracts. Schedule P Interrogatories provides for additional calculation and explanation of various amounts.
2. Earned premium is on a calendar-year basis. Losses incurred should be assigned to the year in which the event occurred that triggered coverage under the contract. This may be a date of accident (occurrence policies), a date of report (claims-made policies), a policy issue date (tail policies), or a date of discovery (fidelity and surety). Hereafter, this is called the “incurred year.”
3. Schedule P is ~~intended to display~~ ten years of historical data for all lines of business.
4. Report all dollar amounts in Schedule P in thousands of dollars (\$000 omitted), by either rounding or truncating.
5. Except for medical professional liability, other liability and products liability which separately display data for occurrence and claims-made coverages and the reinsurance lines, the lines of business are groupings of the lines of business used on the state page. In some cases, the heading of the line of business has been expanded for clarity. Business reported on the Aggregate write-ins for other lines of business line of the Statement of Income and the State Page should be included in the Other Liability sections of Schedule P.

~~Data for Annual Statement Line 30 – Warranty should be reported prospectively (i.e., prior year amounts need not be restated) starting with the 2008 reporting year.~~

6. Data for Annual Statement Line 17.3 – Excess Workers’ Compensation should be reported as Other Liability – Occurrence as appropriate for the contractual terms of the policy.

~~In those instances where a reporting entity files an amended annual statement as a result of a restatement of prior year earned premium, losses or loss adjustment expenses, Schedule P must be restated and included in the amended annual statement.~~

7. Schedule P includes only the data for the reporting entity identified on the Jurat page of the Annual Statement. Do not include consolidated data for affiliated companies except in a Combined Annual Statement. If the reporting entity participates in a pooling agreement, show only its share of the business, not the total for all participants.

~~When changes to pooling agreements impact prior accident years, historical data values in Schedule P Parts, 1 through 6 should be restated based on the new pooling percentage. This should be done to present meaningful development patterns in Schedule P. When pooling changes only impact future accident years, no restatement of historical values should be made.~~

~~Earned premium is on a calendar-year basis. Losses incurred should be assigned to the year in which the event occurred that triggered coverage under the contract. This may be a date of accident (occurrence policies), a date of report (claims made policies), a policy issue date (tail policies), or a date of discovery (fidelity and surety).~~

8. Retroactive reinsurance should not be reflected in Schedule P. The transferor in such an agreement must record, without recognition of the retroactive reinsurance, its loss and loss adjustment expense reserves on a gross basis on its balance sheet and in all schedules and exhibits. The transferee in such an agreement must exclude the retroactive reinsurance from its loss and loss expense reserves and from its schedules and exhibits.
9. A discount implicit in tabular reserves may be included in Schedule P, Part 1. Schedule P, Part 2 is to be reported gross of ALL discounts. Otherwise, Schedule P is to be presented on a non-discounted basis. Information in Schedule P is to be reported on an undiscounted basis in order to make effective use of the triangles in Parts 2, 3 and 4. The reserves reported are expected to represent the ultimate amounts to be paid, including anticipated inflation. If discounting of loss or loss expense reserves is reflected on any line of Page 3 of this Annual Statement, reconciliation is provided in Schedule P, Part 1. Also, workpapers relating to any discount amounts must be available for examination upon request. The tabular reserve

discount does not need to be shown separately. Discounting is governed by *SSAP No. 65—Property and Casualty Contracts*.

10. The reserves for unpaid losses and loss adjustment expenses should take into account the explicit or implicit impacts of the various factors affecting claim frequency or ultimate claim cost.

~~For guidelines on completing Schedule P, see Exhibit B immediately following the instructions for Schedule P, Part 7.~~

The Prior Row:

11. The “prior” row contains data for all incurred years prior to the most recent 10 years. The calculation of the prior row differs by Part and Section.

12. For salvage and subrogation received on the “prior” row, report losses and expenses paid in the current year.

In those instances where a reporting entity files an amended annual statement as a result of a restatement of previous year earned premium, losses or loss adjustment expenses, Schedule P must be restated and included in the amended annual statement.

~~NOTE: Report all dollar amounts in Schedule P in thousands of dollars (\$000 omitted), by either rounding or truncating.~~

Pooling

13. Many insurers have a pooling arrangement with affiliated companies, approved by the domiciliary commissioner, in which the business written is reallocated among the affiliated companies according to a specified percentage. Some affiliated companies may be part of the pool and some may not, and some lines may be included, and some may not. The premiums and losses are to be reported in Schedule P after such pooling arrangements, not before.

14. Pooled business ceded is that which, if retained instead of ceded, would be pooled among the affiliated companies who are party to the pooling agreement. Any such business that is ceded by the pool participants to non-pooled companies before the pooling distribution among the participating companies is considered pooled business ceded. Non-pooled business includes all direct, assumed, and ceded business not subject to pooling, as well as any pooled business that is ceded after the pooling distribution has been made.

15. Direct and Assumed columns include the participation in any pool. In addition, all direct business not pooled plus assumed business from other than the pool is to be included. Ceded columns include the company’s participation in the pool such as any ceding by the company to companies independent of the pool.

16. Claim counts should be reported in accordance with the pooling arrangement and should reflect the company’s proportionate share of the total number of claims. If the company’s losses are 40% of the pool, then 40% of the claim count should be reported.

17. The pooling percentage is to reflect the company’s participation in the pool as of year-end. When changes to pooling agreements impact previous accident years, historical data values in Schedule P Parts, 1 through 6 should be restated based on the new pooling percentage. This should be done to present meaningful development patterns in Schedule P. When pooling changes only impact future accident years, no restatement of historical values should be made. Any significant changes in the pooling arrangements should be reported in the Schedule P Interrogatories. An illustration for reporting pooled business, Exhibit A, follows.

EXHIBIT A

POOLED BUSINESS – SCHEDULE P REPORTING EXAMPLE

This example has been prepared as a clarification of the NAIC *Annual Statement Instructions* to demonstrate how business subject to pooling among affiliated companies should be incorporated in the “Direct + Assumed” and the “Ceded” columns of Schedule P for each affiliated company.

Company A – The Flagship company, does the pooling and cedes some business before pooling.

Company B – Cedes some pool business before ceding to Company A for pooling.

Company C – Cedes business after pooling.

Company D – Cedes nothing except to the pool.

Sample Situation

	<u>Company A</u>	<u>Company B</u>	<u>Company C</u>	<u>Company D</u>	<u>Total</u>
<u>Pool Business:</u>					
1. Direct & Assumed (a)	90,000	15,000	10,000	5,000	120,000
2. Pool Assembly Assumed (Ceded)	25,000	(10,000)	(10,000)	(5,000)	-
3. (Ceded) Before Pooling Dist. (a)	(15,000)(c)	(5,000)(b)	-	-	(20,000)
4. Net Before Pooling Dist.	100,000	-	-	-	100,000
5. Pooling Dist. Assumed (Ceded)	(25,000)	15,000	7,000	3,000	-
6. Net Retained – Amount	75,000	15,000	7,000	3,000	100,000
– Percent Specified	75%	15%	7%	3%	100%
<u>Non-Pool Business:</u>					
7. Direct & Assumed (e)	5,000	4,000	-	-	9,000
8. (Ceded)	(2,000)(e)	(1,000)(e)	(5,000)(d)	-	(8,000)
9. Net	3,000	3,000	(5,000)	-	1,000
<u>Total Business:</u>					
10. Direct & Assumed Before Pooling	95,000	19,000	10,000	5,000	129,000
11. Pool Assembly Assumed (Ceded)	25,000	(10,000)	(10,000)	(5,000)	-
12. (Ceded) Other Than Pooling	(17,000)	(6,000)	(5,000)	-	(28,000)
13. Pooling Dist. Assumed (Ceded)	(25,000)	15,000	7,000	3,000	-
14. Net	78,000	18,000	2,000	3,000	101,000

(a) - Business which, if retained, would be pooled

(b) - Ceded before pool assembly (Line 2)

(c) - Ceded before pooling distribution (Line 5), before and/or after pool assembly (Line 2)

(d) - Ceded after pooling distribution (Line 5)

(e) - Business which, if retained, would not be pooled

Schedule P Reporting

Reporting Principle for Pool Business – Each company reports its share/percent of the total pooled “Direct + Assumed” and the total pooled “Ceded” business respectively.

<u>Direct + Assumed</u>					
15. Pool % of Line 1, Total Col.	90,000	18,000	8,400	3,600	120,000
16. Non-Pooled (Line 7)	5,000	4,000	-	-	9,000
17. Total	95,000	22,000	8,400	3,600	129,000
<u>(Ceded)</u>					
18. Pool % of Line 3, Total Col.	(15,000)	(3,000)	(1,400)	(600)	(20,000)
19. Non-Pooled (Line 8)	(2,000)	(1,000)	(5,000)	-	(8,000)
20. Total	(17,000)	(4,000)	(6,400)	(600)	(28,000)
21. Total Net	78,000	18,000	2,000	3,000	101,000

SCHEDULE P – PART 1

1. Premiums earned and losses paid, unpaid, and incurred should reconcile with the Statement of Income page. Part 1 – Summary is the total of the Schedule P lines. Non-proportional assumed reinsurance – Property, Liability and Financial Lines can be summed together as reported.
2. The columnar headings provide instructions necessary for completion.
 - a. “Assumed” means reinsurance assumed, including from affiliated pooling agreements, but excluding any non proportional reinsurance assumed reported as a separate line and reported accordingly.
 - b. “Direct” means as directly written, but not if part of an affiliated pooling agreement.
 - c. “Ceded” means reinsurance ceded on business so reported as direct or assumed.

~~Except for medical professional liability, other liability and products liability which separately display data for occurrence and claims made coverages and the reinsurance lines, the lines of business are groupings of the lines of business used on the state page. In some cases, the heading of the line of business has been expanded for clarity. Business reported on the Aggregate write-ins for other lines of business line of the Statement of Income and the State Page should be included in the Other Liability sections of Schedule P.~~

3. Number of Claims Reported, Column 12, applies to Auto Liability (commercial and private passenger), Workers’ Compensation, Medical Professional Liability, Homeowners/Farmowners Multiple Peril, Commercial Multiple Peril, Other Liability, Products Liability Auto Physical Damage and Warranty only. This column may be left blank in all other lines, including the Summary. For each year, this Column should include the cumulative number of claims reported through the annual statement date for pooled and non-pooled business. Number of Claims Outstanding, Column 25, must be reported for all lines, except Non-proportional assumed reinsurance – Property, Liability and Financial Lines. For reporting entities reporting on a pooling basis, the pooling percentage should be applied to claim count as well as dollar amounts. Indicate in the Interrogatories whether per claim or per claimant.
4. Cumulative salvage and subrogation received and losses and expenses paid should be reported for each ~~specific~~ specified ~~incurred~~ year. For “prior,” report only salvage and subrogation received and losses and expenses paid in current year.
5. In Schedule P, Part 1, salvage and subrogation received should be reported net of reinsurance, if any. Loss payments are to be reported net of salvage and subrogation received in Schedule P.

~~Adjusting & Other Payments, Column 9, should only reflect ceded recoveries made in 1997 and subsequent. Adjusting & Other Payments, Column 8, should reflect net payments in 1996 and prior and direct and assumed payments for 1997 and subsequent.~~

6. ~~Premiums earned and losses paid, unpaid, and incurred should reconcile with the Statement of Income page. The workpapers that show a reconciliation explaining reinsurance, discounting, and salvage and subrogation adjustments should be available for examination on request.~~

~~“Assumed” means reinsurance assumed, including from affiliated pooling agreements, but excluding any non-proportional reinsurance assumed reported as a separate line and reported accordingly.~~

~~“Direct” means as directly written, but not if part of an affiliated pooling agreement.~~

~~“Ceded” means reinsurance ceded on business so reported as direct or assumed.~~

~~Line 1, “Prior,” Columns 4 through 11 should only reflect amounts paid or received in the current calendar year.~~

7. Report cumulative amounts paid or received for specific years.

8. The loss adjustment expenses from the Underwriting and Investment Exhibit, Part 3, are separated into one of two categories: DCC or A&O. ~~used to be divided in Schedule P into “allocated” and “unallocated,” which were terms that were never clearly defined. Effective January 1, 1998, a detailed definition of these expenses was adopted. The distinction is now between “Defense & Cost Containment” and “Adjusting & Other.” The loss adjustment expenses are separated with the intent of identifying the “Defense & Cost Containment” DCC expenses as are those that are correlated with the loss amounts, and the “Adjusting & Other” A&O as are those expenses that are correlated with claim counts or are general loss adjusting expenses. In projecting the necessary reserves for these expenses, actuaries use a different approach for each of the two types of expenses. It is the character of the expenses that is most important, not whether the expenses were internal or external to the reporting entity.~~
9. ~~“Defense & Cost Containment”~~ DCC expenses include defense, litigation and cost containment expenses, whether internal or external. “Defense” means defense by the reporting entity in a contentious situation, whether a first party or a third-party claim. The fees charged for reporting entity employees should include overhead, just as an outside firm’s charges would include. The expenses exclude expenses incurred in the determination of coverage. These expenses include the following items:
- 1. ~~a.~~ Surveillance expenses;
 - 2. ~~b.~~ Fixed amounts for cost containment expenses;
 - 3. ~~c.~~ Litigation management expenses;
 - 4. ~~d.~~ Loss adjustment expenses for participation in voluntary and involuntary market pools if reported by accident year;
 - 5. ~~e.~~ Fees or salaries for appraisers, private investigators, hearing representatives, reinspectors and fraud investigators, if working in defense of a claim, and fees or salaries for rehabilitation nurses, if such cost is not included in losses;
 - 6. ~~f.~~ Attorney fees incurred owing to a duty to defend, even when other coverage does not exist; and
 - 7. ~~g.~~ The cost of engaging experts.
10. ~~“Adjusting & Other”~~ A&O expenses are the remaining loss adjustment expenses. ~~those expenses other than those above and which have been assigned to the “Loss Adjustment Expense” group in the Underwriting and Investment Exhibit, Part 3, Expenses.~~ These expenses include the following items:
- 1a. Fees of adjusters and settling agents (but not if engaged in a contentious defense);
 - 2b. Loss adjustment expenses for participation in voluntary and involuntary market pools if reported by calendar year;
 - 3c. Attorney fees incurred in the determination of coverage, including litigation between the reporting entity and the policyholder; and
 - 4d. Fees or salaries for appraisers, private investigators, hearing representatives, reinspectors and fraud investigators, if working in the capacity of an adjuster.
11. The foregoing list is not intended to be all-inclusive. We are relying on the reporting entities to use reasonable judgment in particular situations.
12. Reporting entities should assign the ~~“Defense & Cost Containment”~~ DCC expenses to the accident incurred year in which the associated losses were assigned. Reporting entities may assign the ~~“Adjusting & Other”~~ A&O expenses in any justifiable way among the accident incurred years. The preferred way is to apportion these expenses in proportion to the number of claims reported, closed, or outstanding each year.
13. **Please Note:** This instruction is intended solely to give guidance on reporting loss adjustment expenses in Schedule P in the annual statement. It is not intended to provide guidance on the types of expenses to include in loss adjustment expenses. These definitions of ~~Defense & Cost Containment~~ DCC expense and ~~Adjusting & Other~~ A&O expense are not intended to affect insurance or reinsurance agreements or other contractual agreements.
14. Column 24 is equal to Column 13 – Column 14 + Column 15 – Column 16 + Column 17 – Column 18 + Column 19 – Column 20 + Column 21 – Column 22.
15. Column 28, “Net,” equals Column 26 – Column 27, which equals Column 11 + Column 24.

16. Columns 32 and 33 require reporting of the discount, if any, as included on any line in Page 3 on liabilities for unpaid losses and expenses, in regard to non-tabular losses and expenses. (See definition of tabular reserves under Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses in the instructions for the Notes to the Financial Statements.) Columns 35 and 36 are the Column 24 unpaid losses and expenses net of the discount in Columns 32 and 33. Columns 35 and 36 must be completed and should agree with net balance sheet reserves after discount. If the reporting entity reports on a pooling basis, then the percentage of that pool reported herein should be entered in Column 34. If some of the business is pooled and some is not, leave Column 34 blank and explain in Interrogatory 7.2 of the Schedule P Interrogatories.

17. Report in Column 23 the estimated amount of anticipated salvage and subrogation that has been taken as credit (netted) in the reserves for unpaid losses and loss adjustment expenses reported in Column 24. (Note: Column 23 is a memo column only as the amounts contained therein have already been taken into consideration in Columns 13 through 20.)

18. The definitions of the named lines are the same as used in the Statement of Income page or on the State Page, except that the reinsurance lines are defined:

a. Non-proportional assumed reinsurance –Property Reinsurance

Includes all the following lines: Fire, Allied Lines, Ocean Marine, Inland Marine, Pet Insurance Plans, Earthquake, Group Accident and Health, Credit Accident and Health, Other Accident and Health, Auto Physical Damage, Boiler and Machinery, Burglary and Theft and International (of the foregoing).

b. Non-proportional assumed reinsurance – Liability

Includes all the following lines: Farmowners Multiperil, Homeowners Multiperil, Commercial Multiperil, Medical Professional Liability, Workers' Compensation, Other Liability, Products Liability, Auto Liability, Aircraft (all peril) and International (of the foregoing).

c. Non-proportional assumed reinsurance – Financial

Includes all the following lines: Financial Guaranty, Fidelity, Surety, Credit, and International (of the foregoing).

19. All proportional reinsurance must be allocated to appropriate lines.

20. As used in this instruction “non-proportional reinsurance” means reinsurance in excess of retention by the ceding company, and “proportional reinsurance” means fixed percentage of all losses.

21. For contracts that afford both proportional and non-proportional reinsurance, allocate premiums and losses to their component parts.

The Prior Row

22. Row 1 “Prior” row, Columns 4 through 11, should only reflect amounts paid or received in the current calendar year.

Pooling

~~Many insurers have a pooling arrangement with affiliated companies, approved by the domiciliary commissioner, in which the business written is reallocated among the affiliated companies according to a specified percentage. Some affiliated companies may be part of the pool and some may not, and some lines may be included, and some may not. The premiums and losses are to be reported in Schedule P after such pooling arrangements, not before.~~

~~Pooled business ceded is that which, if retained instead of ceded, would be pooled among the affiliated companies who are party to the pooling agreement. Any such business that is ceded by the pool participants to non-pooled companies prior to the pooling distribution among the participating companies is considered pooled business ceded. Non-pooled business includes all direct, assumed, and ceded business not subject to pooling, as well as any pooled business that is ceded after the pooling distribution has been made.~~

~~Direct and Assumed columns include the participation in any pool. In addition, all direct business not pooled plus assumed business from other than the pool is to be included. Ceded columns include the company's participation in the pool such as any ceding by the company to companies independent of the pool.~~

~~Claim counts should be reported in accordance with the pooling arrangement and should reflect the company's proportionate share of the total number of claims. If the company's losses are 40% of the pool, then 40% of the claim count should be reported.~~

~~The pooling percentage is to reflect the company's participation in the pool as of year end. When changes to pooling agreements impact prior accident years, historical data values in Schedule P Parts, 1 through 6 should be restated based on the new pooling percentage. This should be done to present meaningful development patterns in Schedule P. When pooling changes only impact future accident years, no restatement of historical values should be made. Any significant changes in the pooling arrangements should be reported in the Schedule P Interrogatories. An illustration for reporting pooled business, Exhibit A, follows.~~

EXHIBIT A

POOLED BUSINESS— SCHEDULE P REPORTING EXAMPLE

This example has been prepared as a clarification of the NAIC *Annual Statement Instructions* to demonstrate how business subject to pooling among affiliated companies should be incorporated in the “Direct + Assumed” and the “Ceded” columns of Schedule P for each affiliated company.

- Company A _____ The Flagship company, does the pooling and cedes some business before pooling.
- Company B _____ Cedes some pool business before ceding to Company A for pooling.
- Company C _____ Cedes business after pooling.
- Company D _____ Cedes nothing except to the pool.

Sample Situation

	<u>Company A</u>	<u>Company B</u>	<u>Company C</u>	<u>Company D</u>	<u>Total</u>
<u>Pool Business:</u>					
1. Direct & Assumed (a)	90,000	15,000	10,000	5,000	120,000
2. Pool Assembly Assumed (Ceded)	25,000	(10,000)	(10,000)	(5,000)	_____
3. (Ceded) Before Pooling Dist. (a)	(15,000)(e)	(5,000)(b)	_____	_____	(20,000)
4. Net Before Pooling Dist.	100,000	-	-	_____	100,000
5. Pooling Dist. Assumed (Ceded)	(25,000)	15,000	7,000	3,000	_____
6. Net Retained Amount	75,000	15,000	7,000	3,000	100,000
Percent Specified	75%	15%	7%	3%	100%
<u>Non-Pool Business:</u>					
7. Direct & Assumed (e)	5,000	4,000	_____	_____	9,000
8. (Ceded)	(2,000)(e)	(1,000)(e)	(5,000)(d)	_____	(8,000)
9. Net	3,000	3,000	(5,000)	_____	1,000
<u>Total Business:</u>					
10. Direct & Assumed Before Pooling	95,000	19,000	10,000	5,000	129,000
11. Pool Assembly Assumed (Ceded)	25,000	(10,000)	(10,000)	(5,000)	_____
12. (Ceded) Other Than Pooling	(17,000)	(6,000)	(5,000)	_____	(28,000)
13. Pooling Dist. Assumed (Ceded)	(25,000)	15,000	7,000	3,000	_____
14. Net	78,000	18,000	2,000	3,000	101,000

- (a) _____ Business which, if retained, would be pooled
- (b) _____ Ceded before pool assembly (Line 2)
- (c) _____ Ceded before pooling distribution (Line 5), before and/or after pool assembly (Line 2)
- (d) _____ Ceded after pooling distribution (Line 5)

(e) Business which, if retained, would not be pooled

Schedule P Reporting

Reporting Principle for Pool Business— Each company reports its share/percent of the total pooled “Direct + Assumed” and the total pooled “Ceded” business respectively.

<u>Direct + Assumed</u>					
15. Pool % of Line 1, Total Col.	90,000	18,000	8,400	3,600	120,000
16. Non Pooled (Line 7)	<u>5,000</u>	<u>4,000</u>			<u>9,000</u>
17. Total	95,000	22,000	<u>8,400</u>	<u>3,600</u>	129,000
<u>(Ceded)</u>					
18. Pool % of Line 3, Total Col.	(15,000)	(3,000)	(1,400)	(600)	(20,000)
19. Non Pooled (Line 8)	<u>(2,000)</u>	<u>(1,000)</u>	<u>(5,000)</u>		<u>(8,000)</u>
20. Total	<u>(17,000)</u>	<u>(4,000)</u>	<u>(6,400)</u>	<u>(600)</u>	<u>(28,000)</u>
21. Total Net	78,000	18,000	2,000	3,000	101,000

SCHEDULE P – PARTS 1A THROUGH 1U

1. Reporting entities should complete Schedule P in thousands only but must report all claim counts in whole numbers.

~~NOTE: For “prior,” report amounts paid or received in current year only. Report cumulative amounts paid or received for specific years. Report loss payments net of salvage and subrogation received.~~

2. The number of claims reported is to be cumulative by ~~accident~~ incurred year. The number of claims reported in each ~~accident~~ incurred year is equal to the number of open claims at the end of the current year plus cumulative claims closed with or without payment for current and ~~prior~~ previous calendar years.

3. If the Company changes its method of counting claims, the new method should be disclosed in Schedule P Interrogatories, Interrogatory 6.

4. Products Liability must be reported separately from Other Liability throughout the statement. This requires that companies separate and restate amounts previously reported as “Other Liability” into the appropriate parts of Schedule P and fully disclose amounts pertaining to “Products Liability.” ~~For a definition of what is to be included in each of these lines, refer to the Appendix of these instructions.~~

~~For Medical Professional Liability, Other Liability and Products Liability lines, data for occurrence coverages must be reported separately from data for claims made coverages for accident years 1987 and subsequent. If available, data for occurrence coverages should also be reported separately from data for claims made coverages for accident years 1986 and prior. If the separate data is not available for accident years 1986 and prior, combined data must be reported in the occurrence parts of Schedule P for those accident years only.~~

5. “Claims-made Earned Premiums” shall include earned premiums arising from any policy where the predominant exposure is claims-made, but “Claims-made Earned Premiums” shall not include “Tail Earned Premiums.”

6. “Occurrence Earned Premiums” are all premiums, which are not claims-made.

7. “Tail Earned Premiums” applicable to a claims-made insurance program are to be included in the occurrence Part for the respective line.

8. The following rules apply to accounting for claims-made losses:

a. The “incurred” date shall be the report date for losses attributable to claims-made (but not “tail” forms).

b. Losses shall be booked to the report year that is consistent with the report year definition contained in the policy.

9. The rule for accounting for losses incurred on tail policies is that such losses must be assigned to the year in which the policy was issued and are to be included in the Occurrence Part for the respective line.

10. Report in Column 23 the estimated amount of anticipated salvage and subrogation that has been taken as credit (netted) in the reserves for unpaid losses and loss adjustment expenses reported in Column 24. (Note: Column 23 is a memo column only as the amounts contained therein have already been taken into consideration in Columns 13 through 20.)

11. In Column 28, “Net,” the amount should equal Column 26 – Column 27, which equals Column 11 + Column 24.

The Prior Row

12. For the “prior” row, report amounts paid or received in current year only. Report cumulative amounts paid or received for specific years. Report loss payments net of salvage and subrogation received.

SCHEDULE P – PARTS 2, 3, AND 4

All amounts in Schedule P, Parts 2, 3, and 4 are reported net of reinsurance.

1. Schedule P, Part 2 provides a loss and expense development overview to test the adequacy of the reporting entity's reserves. Schedule P, Part 3 shows the payment patterns for cash flow projections, discounting calculations, and actuarial projections. Schedule P, Part 4 is an exhibit showing the historical bulk and IBNR reserves as reported. Part 4 does not show a development of these reserves, and it will not, by itself, provide a test of the adequacy of these reserves.
2. Schedule P, Parts 2, 3 and 4 have parallel formats and are the basic exhibits for actuarial and financial analyses. The same Line Titles that applied to Schedule P, Part 1 also apply to Parts 2, 3 and 4.
 - a. All amounts in Schedule P, Parts 2, 3, and 4 are reported net of reinsurance.
 - b. All amounts are to be reported net of salvage and subrogation paid and anticipated.
 - c. All amounts in Parts 2 and 4 must be reported gross of both tabular and non-tabular discounting.
 - d. In part 2, the "Development" in Column 11 and 12 should be the current year less the first previous year (for 1-year development) or second prior previous year (for 2-year development), showing the (redundant) or adverse development.
 - e. Report all amounts in thousands of dollars (\$000 omitted), by either rounding or truncating.

Loss Adjustment Expenses:

3. The triangles include only the ~~"Defense & Cost Containment"~~DCC loss adjustment expenses. The ~~old Schedule P, Parts 2, 3 and 4 contained only the previously termed "allocated" loss adjustment expenses. Now the term "Defense & Cost Containment" is used. As before, the reason for this is that "Defense & Cost Containment"~~DCC adjustment expenses correlate with loss amounts, but the ~~"Adjusting & Other" A&O~~ adjusting expenses do not.

Bulk and IBNR Reserves:

4. The Bulk and IBNR reserves for losses and expenses are intended to include reserves for incurred but not reported claims, for reopened claims, for development on case reserves of reported claims, and for aggregate reserves on newly reported claims without specific case reserves. The Bulk and IBNR reserves are the actuarially determined reserves and are included in the losses unpaid and loss expenses unpaid reported in Schedule P, Parts 1 and 2.
5. These reserves include provision for ~~"defense and cost containment"~~DCC expenses, unlike the reserves reported in the Underwriting and Investment Exhibit, Part 2A.

The Prior Line Row:

6. In Part 2, Line 1, Column 1, include the loss and expense reserves (case + bulk + IBNR) previously reported at year-end of the last year for all accident years ~~prior to~~before the last year. The subsequent development each year across Line 1 will relate to these reserves and will show the subsequent payments and outstanding reserves.
7. In Part 3, Line 1, Column 1, the amount entered should always be "zero." In Line 1, Column 2, the amount should be the loss and expense payments made in that year on the reserves reported in Part 2, Line 1, Column 1. (These payments should also have been included in Part 2, Line 1, Column 2.) In Line 1, Column 3, the amount should be the loss and expense payments made in that year and the preceding year on the reserves reported in Part 2, Line 1, Column 2. (These payments should also have been included in Part 2, Line 1, Column 3.) Columns 4 through 10 should continue to cumulate the payments in the same way and tie into the Part 2 "prior" ~~line row~~.
8. In Part 4, Line Row 1, Column 1, the amount entered should be the bulk and IBNR that was included in Part 2, Line Row 1, Column 1, (which should equal the case reserves plus the bulk and IBNR). In fact, the entire Line Row 1 should be the bulk and IBNR included in Part 2, Line Row 1.

| 9. The “prior” ~~line-row~~ can be reconciled with the immediately preceding year’s Annual Statement by breaking down the accident years in the preceding Annual Statement and properly summing the parts.

SCHEDULE P – PART 5

1. Part 5 is a reporting of claim count information in one location, all of which should have been reported in the current or ~~prior previous~~ Annual Statements. Section 1 shows the number of claims closed with loss payment, as previously reported in Part 3, Column 11. Section 2 shows the number of claims outstanding, as previously reported in Part 1, Column 25, for all years, since this information has always been required in Schedule P. Section 3 shows the number of claims reported, as previously reported in Part 1, Column 12.

~~In Section 1, the Prior Line should show the number of claims closed with loss payment in each respective year for prior years.~~

~~In Section 2, the Prior Line should show the number of claims outstanding in each respective year for prior years.~~

~~In Section 3, the Prior Line should show the number of claims reported in each respective year for prior years. Even though Schedule P, Part 1, Column 12, does not require prior information, reporting entities should have this information available. If not, reasonable estimates should be made.~~

2. All claim count information reported in Schedule P should be on a “direct and assumed” basis and should reconcile. “Direct and assumed” means direct plus the proportion of a pool plus proportional reinsurance assumed. The same percentage used for dollar amounts should also be used for the claim counts.

The Prior Row

3. In Section 1, the Prior Row should show the number of claims closed with loss payment in each respective year for prior years.

4. In Section 2, the Prior Row should show the number of claims outstanding in each respective year for prior years.

5. In Section 3, the Prior Row should show the number of claims reported in each respective year for prior years. Even though Schedule P, Part 1, Column 12, does not require prior row information, reporting entities should have this information available. If not, reasonable estimates should be made.

SCHEDULE P – PART 6

1. For Schedule P, Part 6, the premiums to be reported are exposure or coverage year earned premiums, recalculated each subsequent year to reflect audits, retrospective adjustments based on loss experience, accounting lags, etc. Mechanically, the written premium file would be restated and the earned premium calculation repeated each year. Premium adjustments for policy periods that cover more than one calendar year should be proportionately distributed between the calendar years covered by the policy period.

2. The objective is to develop earned premiums by calendar year of coverage consistent with the loss and ~~Defense & Cost Containment~~DCC expense by ~~accident~~ incurred year. Only accident years 1993 and subsequent must be reported. The difference between Sections 1 and 2 should equal the ~~proper~~ total net earned premiums.

3. A further objective is to determine a more accurate loss and ~~Defense & Cost Containment~~DCC expense ratio and to be able to project the earned but unbilled premiums, which may be an asset or liability. The reporting entity may use any method to recalculate the premiums, which will achieve this objective.

4. ~~The example in Exhibit B demonstrates how the sections should look if all years are retroactively determined and reported.~~ Column 11 is for informational purposes and shows the distribution of premiums earned during the current year for the prior years. Premiums as reported in Schedule P, Part 1, Columns 1 or 2, are also shown at the bottom of the exhibit to demonstrate the relationship and to show how Part 6 reconciles with Part 1.

~~The Prior Line should show the earned premium adjustment in each respective year for prior years. For prior experience years (columns), Line 1 for a particular year of experience (x) can be determined from the prior year’s Schedule P, Part 6, as the sum of Lines 1 plus 2 for experience year (x) (column) minus Line 2 for the preceding year (x-1).~~

5. The same features are applicable for Section 2 on ceded business.

6. NOTE: Purchased tail coverage policies are issued in the year that the coverage is effective. Free extended tail coverage is issued in the year the coverage is triggered.

The Prior Row:

7. The Prior Row should show the earned premium adjustment in each respective year for prior years. For prior experience years (columns), Row 1 for a particular year of experience (x) can be determined from the prior year's Schedule P, Part 6, as the sum of Rows 1 plus 2 for experience year (x) (column) minus Row 2 for the preceding year (x-1).

SCHEDULE P – PART 7

1. Only the experience on contracts that meet the following definition should be included in ~~Schedule P, Part 7~~.

Loss sensitive contracts shall meet the following criteria:

- a. Contracts where an increase in losses on a policy can cause an increase in net payment (by the insured) for that policy.
 - b. The amount of additional payment (by the insured) must be at least 75% (50% for reinsurance contracts) of the additional losses, before application of aggregate and per accident/claimant limits or caps.
 - c. The net amount paid (by the insured) must also be able to differ by at least 20% (10% for reinsurance contracts), from highest to lowest possible charge in reaction to the loss experience.
 - d. The maximum possible payment by the insured should also be at least 15% (7.5% for reinsurance contracts) above what the insured would pay based on expected loss experience. In other words, the maximum charge should not approximate the expected charge.
 - e. The additional payment shall be in the form of additional premiums or additional commissions.
 - f. The additional losses and corresponding payments must flow through the income and balance sheets and cannot be “off-balance sheet.” For example, a deductible feature does not make a contract “loss sensitive” under this definition, as neither the losses under the deductible nor the reimbursements for these losses flow through the income statement.
2. ~~Schedule P, Part 7~~ is only required of reporting entities who claim a reduction in their Risk-Based Capital for Loss Sensitive Contracts. Such reporting entities must complete the entire schedule in each year that they claim such credit.
 3. ~~Schedule P, Part 7A~~ provides experience on primary contracts. ~~Schedule P, Part 7B~~ provides experience on reinsurance contracts.

Section 1: Current Year Loss and LAE Reserves and Net Written Premium

4. Column (1) ~~of Section 1, Parts 7A and 7B of Schedule P~~ should agree with the net loss and loss adjustment expense reserves (undiscounted) reported in the corresponding Part 1 of Schedule P.
5. Column (2) ~~of Section 1, Parts 7A and 7B of Schedule P~~ should reflect the corresponding values for Loss Sensitive Contracts only. Primary Loss Sensitive should include direct losses and expenses unpaid less reinsurance on those direct losses and expenses. Reinsurance Loss Sensitive should include unpaid assumed losses and expenses less any retrocessions on those losses and expenses.
6. Column (4) x 1000 ~~of Section 1 Parts 7A and 7B of Schedule P~~ should agree with the net written premiums reported in the Statement of Income page.
7. Column (5) ~~of Section 1, Parts 7A and 7B of Schedule P~~ should reflect the corresponding premium for Loss Sensitive Contracts only. Primary Loss Sensitive should include direct premiums written on loss sensitive contracts less reinsurance on those direct premiums. Reinsurance Loss Sensitive should include assumed loss sensitive premiums less any retroceded premiums.
8. Columns (3) and (6) ~~of Section 1, Parts 7A and 7B of Schedule P~~ are ratios of (2) to (1) and (5) to (4), respectively. Express as percentages showing one decimal place (e.g., 24.2%).

Sections 2 and 3: Loss Development

9. In each row of Section 2, ~~Parts 7A and 7B of Schedule P~~, display the reported estimate of ultimate losses and ~~Defense & Cost Containment~~ DCC expense on all Loss Sensitive Contracts issued (i.e., with inception dates) in that year. Each reported estimate should be the estimate of ultimate loss and ~~Defense and Cost Containment~~ DCC Expense as of each year-end, not the incremental amounts incurred during each calendar year. The resulting data should display the reported estimate of ultimate losses and ~~Defense and Cost Containment~~ DCC Expense on a Policy Year basis. ~~The "Prior" row should display the reported estimate of ultimate losses and Defense and Cost Containment Expense on a Policy Year basis for all policy years ten or more years older than the current policy year.~~

One reasonability benchmark that can be used to verify that the data is presented on a Policy Year basis is to compare the magnitude of an issue year's ultimate loss and ~~Defense and Cost Containment~~ DCC Expense estimates as of twelve months and as of twenty-four months. The valuation as of twenty-four months should be approximately twice as great as the valuation as of twelve months. (For example, Issue year 2004 estimate of ultimate losses and ~~Defense and Cost Containment~~ DCC Expense at year-end 2005 should be approximately twice as great as the estimate of Issue Year 2004 ultimate losses and ~~Defense and Cost Containment~~ DCC Expense at year-end 2004.) This reasonability benchmark assumes roughly even policy writings throughout the year. If a company's writings are proportionately greater in the first half of the year than the second half of the year, the valuation as of twelve months can reasonably be expected to be greater than 50% of the twenty-four-month valuation.

10. In each row of Section 3, ~~Parts 7A and 7B of Schedule P~~, show ~~similarly the bulk and IBNR reserves included in the estimate of ultimate loss and Defense and Cost Containment Expense in Section 2.~~ ~~Defense & Cost Containment Expense.~~

Sections 4 and 5: Premium Development

- ~~11. Loss Sensitive Reinsurance Contracts must be segmented between those on which premium is the adjustable element, and those on which commissions paid to the cedant are adjustable with losses. The premium development schedule (Sections 4 and 5, Part 7B of Schedule P) should only include the experience of contracts with a variable premium.~~

- ~~12.11. In Section 4, ~~Parts 7A and 7B of Schedule P~~ for each year of issue, display the net earned premiums reported at the end of each calendar year. Each reported estimate should be the estimate of net earned premium as of each year-end, not the incremental amounts earned during each calendar year. The resulting data should display the reported estimate of net earned premium on a Policy Year basis. ~~The "Prior" row should display the reported estimate of net earned premium on a Policy Year basis for all policy years ten or more years older than the current policy year.~~~~

One reasonability benchmark that can be used to verify that the data is presented on a Policy Year basis is to compare the magnitude of an issue year's net earned premium as of twelve months and as of twenty-four months. The valuation as of twenty-four months should be approximately twice as great as the valuation as of twelve months. This reasonability benchmark assumes roughly even policy writings throughout the year. If a company's writings are proportionately greater in the first half of the year than the second half of the year, the valuation as of twelve months can reasonably be expected to be greater than 50% of the twenty-four-month valuation.

A second reasonability benchmark that can be used to verify the data presentation is to examine the ratio of Section 2 incurred loss and allocated expenses to Section 4 net earned premiums. The ratio of incurred losses to net earned premiums should all be similar at each valuation date. If Section 2 data is not on a policy year basis, but Section 4 is, or vice-versa, the ratios as of twelve months will look very different than the ratios as of twenty-four months.

- ~~13.12. In Section 5, ~~Parts 7A and 7B of Schedule P~~, show separately any bulk assets or liabilities for future additional premiums or return of premiums included in the earned premium in Section 4. An entry denoting the expectation of future additional premiums should be displayed as a positive value. An entry denoting the expectation of future return premiums should be displayed as a negative value.~~

- ~~13. (Part 7B only): Loss Sensitive Reinsurance Contracts must be segmented between those on which premium is the adjustable element, and those on which commissions paid to the cedant are adjustable with losses. The premium development schedule (Sections 4 and 5, Part 7B of Schedule P) should only include the experience of contracts with a variable premium.~~

Sections 6 and 7 (Part 7B only): Commission Development

14. ~~In Part 7B of Schedule P, for~~ For all reinsurance contracts where the commission paid to the cedant varies with losses, display the development of that commission in Section 6 and display any assets or liabilities accrued in respect of the commission in Section 7. An entry denoting the expectation of future additional commissions to be paid should be displayed as a negative value. An entry denoting the expectation of future return commissions should be displayed as a positive value.

The Prior Row:

15. The “Prior” row in Sections 2 and 3 should display the reported estimate of ultimate losses and DCC Expense on a Policy Year basis for all policy years ten or more years older than the current policy year.

16. The “Prior” row in Sections 4 and 5 should display the reported estimate of net earned premium on a Policy Year basis for all policy years ten or more years older than the current policy year.

Formulas for Schedule P, Parts 2-4

Schedule P – Part 2 – Incurred Net Losses and Defense and Cost Containment Reported at Year-End

	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Prior	Case + Bulk + IBNR rsvs on <2016 @ Ye 2016	paid in 2017 rsvs on < 2016 @ ye 2017	paid 2017 thru 2018 + rsvs on < 2016@ ye 2018	paid 2017 thru 2019 + rsvs on < 2016 @ ye 2019	paid 2017 thru 2020 + rsvs on < 2016 @ ye 2020	paid 2017 thru 2021 + rsvs on < 2016 @ ye 2021	paid 2017 thru 2022 + rsvs on < 2016 @ ye 2022	paid 2017 thru 2023 + rsvs on < 2016 @ ye 2023	paid 2017 thru 2024 + rsvs on < 2016 @ ye 2024	paid 2017 thru 2025 + rsvs on < 2016 @ ye 2025
2016	paid in 2016 + rsvs on 2016 @ ye 2016	paid thru 2017 + rsvs on 2016 @ ye 2017	paid thru 2018 + rsvs on 2016 @ ye 2018	paid thru 2019 + rsvs on 2016 @ ye 2019	paid thru 2020 + rsvs on 2016 @ ye 2020	paid thru 2021 + rsvs on 2016 @ ye 2021	paid thru 2022 + rsvs on 2016 @ ye 2022	paid thru 2023 + rsvs on 2016 @ ye 2023	paid thru 2024 + rsvs on 2016 @ ye 2024	paid thru 2025 + rsvs on 2016 @ ye 2025
2017		paid in 2017 + rsvs on 2017 @ ye 2017	paid thru 2018 + rsvs on 2017 @ ye 2018	paid thru 2019 + rsvs on 2017 @ ye 2019	paid thru 2020 + rsvs on 2017 @ ye 2020	paid thru 2021 + rsvs on 2017 @ ye 2021	paid thru 2022 + rsvs on 2017 @ ye 2022	paid thru 2023 + rsvs on 2017 @ ye 2023	paid thru 2024 + rsvs on 2017 @ ye 2024	paid thru 2025 + rsvs on 2017 @ ye 2025
2018			paid in 2018 + rsvs on 2018 @ ye 2018	paid thru 2019 + rsvs on 2018 @ ye 2019	paid thru 2020 + rsvs on 2018 @ ye 2020	paid thru 2021 + rsvs on 2018 @ ye 2021	paid thru 2022 + rsvs on 2018 @ ye 2022	paid thru 2023 + rsvs on 2018 @ ye 2023	paid thru 2024 + rsvs on 2018 @ ye 2024	paid thru 2025 + rsvs on 2018 @ ye 2025
2019				paid in 2019 + rsvs on 2019 @ ye 2019	paid thru 2020 + rsvs on 2019 @ ye 2020	paid thru 2021 + rsvs on 2019 @ ye 2021	paid thru 2022 + rsvs on 2019 @ ye 2022	paid thru 2023 + rsvs on 2019 @ ye 2023	paid thru 2024 + rsvs on 2019 @ ye 2024	paid thru 2025 + rsvs on 2019 @ ye 2025
2020					paid in 2020 + rsvs on 2020 @ ye 2020	paid thru 2021 + rsvs on 2020 @ ye 2021	paid thru 2022 + rsvs on 2020 @ ye 2022	paid thru 2023 + rsvs on 2020 @ ye 2023	paid thru 2024 + rsvs on 2020 @ ye 2024	paid thru 2025 + rsvs on 2020 @ ye 2025
2021						paid in 2021 + rsvs on 2021 @ ye 2021	paid thru 2022 + rsvs on 2021 @ ye 2022	paid thru 2023 + rsvs on 2021 @ ye 2023	paid thru 2024 + rsvs on 2021 @ ye 2024	paid thru 2025 + rsvs on 2021 @ ye 2025
2022							paid in 2022 + rsvs on 2022 @ ye 2022	paid thru 2023 + rsvs on 2022 @ ye 2023	paid thru 2024 + rsvs on 2022 @ ye 2024	paid thru 2025 + rsvs on 2022 @ ye 2025
2023								paid in 2023 + rsvs on 2023 @ ye 2023	paid thru 2024 + rsvs on 2023 @ ye 2024	paid thru 2025 + rsvs on 2023 @ ye 2025
2024									paid in 2024 + rsvs on 2024 @ ye 2024	paid thru 2025 + rsvs on 2024 @ ye 2025
2025										paid in 2025 + rsvs on 2025 @ ye 2025

Notes Figures are net of reinsurance, subrogation, and salvage.

	Reserves Only. Subsequent development relates only to subsequent payments and reserves.
	From Part 1: Column 11 - (Column 8 - Column 9) + Column 24 - (Column 21 - Column 22)

Schedule P— Part 3 – Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year-End

	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
Prior	000	paid in 2017 thru on < 2016	paid 2017 thru 2018 on < 2016	paid 2017 thru 2019 on < 2016	paid 2017 thru 2020 on < 2016	paid 2017 thru 2021 on < 2016	paid 2017 thru 2022 on < 2016	paid 2017 thru 2023 on < 2016	paid 2017 thru 2024 on < 2016	paid 2017 thru 2025 on < 2016		
2016	paid in 2016 on 2016	paid thru 2017 on 2016	paid thru 2018 on 2016	paid thru 2019 on 2016	paid thru 2020 on 2016	paid thru 2021 on 2016	paid thru 2022 on 2016	paid thru 2023 on 2016	paid thru 2024 on 2016	paid thru 2025 on 2016		
2017		paid in 2017 on 2017	paid thru 2018 on 2017	paid thru 2019 on 2017	paid thru 2020 on 2017	paid thru 2021 on 2017	paid thru 2022 on 2017	paid thru 2023 on 2017	paid thru 2024 on 2017	paid thru 2025 on 2017		
2018			paid in 2018 on 2018	paid thru 2019 on 2018	paid thru 2020 on 2018	paid thru 2021 on 2018	paid thru 2022 on 2018	paid thru 2023 on 2018	paid thru 2024 on 2018	paid thru 2025 on 2018		
2019				paid in 2019 on 2019	paid thru 2020 on 2019	paid thru 2021 on 2019	paid thru 2022 on 2019	paid thru 2023 on 2019	paid thru 2024 on 2019	paid thru 2025 on 2019		
2020					paid in 2020 on 2020	paid thru 2021 on 2020	paid thru 2022 on 2020	paid thru 2023 on 2020	paid thru 2024 on 2020	paid thru 2025 on 2020		
2021						paid in 2021 on 2021	paid thru 2022 on 2021	paid thru 2023 on 2021	paid thru 2024 on 2021	paid thru 2025 on 2021		
2022							paid in 2022 on 2022	paid thru 2023 on 2022	paid thru 2024 on 2022	paid thru 2025 on 2022		
2023								paid in 2023 on 2023	paid thru 2024 on 2023	paid thru 2025 on 2023		
2024									paid in 2024 on 2024	paid thru 2025 on 2024		
2025										paid in 2025 on 2025		

Notes: Figures are net of reinsurance.
 Figures are net of salvage and subrogation received.

From Part 1: Column 4 - Column 5 + Column 6 - Column 7
 (or Column 11 - (Column 8 - Column 9))

**Schedule P - Part 4 - Bulk and INBR Reserves on Net Losses and Defense & Cost Containment DCC Expenses
Reported at Year End**

	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Prior	rsvs ye 2016 on < 2016	rsvs ye 2017 on < 2016	rsvs ye 2018 on < 2016	rsvs ye 2019 on < 2016	rsvs ye 2020 on < 2016	rsvs ye 2021 on < 2016	rsvs ye 2022 on < 2016	rsvs ye 2023 on < 2016	rsvs ye 2024 on < 2016	rsvs ye 2025 on < 2016
2016	rsvs ye 2016 on 2016 ay	rsvs ye 2017 on 2016 ay	rsvs ye 2018 on 2016 ay	rsvs ye 2019 on 2016 ay	rsvs ye 2020 on 2016 ay	rsvs ye 2021 on 2016 ay	rsvs ye 2022 on 2016 ay	rsvs ye 2023 on 2016 ay	rsvs ye 2024 on 2016 ay	rsvs ye 2025 on 2016 ay
2017		rsvs ye 2017 on 2017 ay	rsvs ye 2018 on 2017 ay	rsvs ye 2019 on 2017 ay	rsvs ye 2020 on 2017 ay	rsvs ye 2021 on 2017 ay	rsvs ye 2022 on 2017 ay	rsvs ye 2023 on 2017 ay	rsvs ye 2024 on 2017 ay	rsvs ye 2025 on 2017 ay
2018			rsvs ye 2018 on 2018 ay	rsvs ye 2019 on 2018 ay	rsvs ye 2020 on 2018 ay	rsvs ye 2021 on 2018 ay	rsvs ye 2022 on 2018 ay	rsvs ye 2023 on 2018 ay	rsvs ye 2024 on 2018 ay	rsvs ye 2025 on 2018 ay
2019				rsvs ye 2019 on 2019 ay	rsvs ye 2020 on 2019 ay	rsvs ye 2021 on 2019 ay	rsvs ye 2022 on 2019 ay	rsvs ye 2023 on 2019 ay	rsvs ye 2024 on 2019 ay	rsvs ye 2025 on 2019 ay
2020					rsvs ye 2020 on 2020 ay	rsvs ye 2021 on 2020 ay	rsvs ye 2022 on 2020 ay	rsvs ye 2023 on 2020 ay	rsvs ye 2024 on 2020 ay	rsvs ye 2025 on 2020 ay
2021						rsvs ye 2021 on 2021 ay	rsvs ye 2022 on 2021 ay	rsvs ye 2023 on 2021 ay	rsvs ye 2024 on 2021 ay	rsvs ye 2025 on 2021 ay
2022							rsvs ye 2022 on 2022 ay	rsvs ye 2023 on 2022 ay	rsvs ye 2024 on 2022 ay	rsvs ye 2025 on 2022 ay
2023								rsvs ye 2023 on 2023 ay	rsvs ye 2024 on 2023 ay	rsvs ye 2025 on 2023 ay
2024									rsvs ye 2024 on 2024 ay	rsvs ye 2025 on 2024 ay
2025										rsvs ye 2025 on 2025 ay

Notes: Figures are net of reinsurance.

From Part 1: Column 15 - Column 16 + Column 19 - Column 20

Schedule P — Part 6 — Earned Premium Development ~~Earned Premium Development for Schedule P, Part 6~~

Example

Year in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 Current Year Premiums Earned
1. Prior	10,000	6,000	4,000	3,000	2,200	1,500	1,000	600	300	100	100
2. 2016	350,000	354,000	356,000	357,000	357,800	358,500	359,000	359,400	359,700	359,900	200
3. 2017	XXXX	355,000	359,000	361,000	362,000	362,800	363,500	364,000	364,400	364,700	300
4. 2018		XXXX	360,000	364,000	366,000	367,000	367,800	368,500	369,000	369,400	400
5. 2019			XXXX	365,000	369,000	371,000	372,000	372,800	373,500	374,000	500
6. 2020				XXXX	370,000	374,000	376,000	377,000	377,800	378,500	600
7. 2021					XXXX	375,000	379,000	381,000	382,000	382,800	700
8. 2022						XXXX	380,000	384,000	386,000	387,000	1,000
9. 2023							XXXX	385,000	389,000	391,000	2,000
10. 2024								XXXX	390,000	394,000	4,000
11. 2025									XXXX	395,000	395,000
12. Total										XXXX	405,000
Schedule P Part 1 EP	360,000	365,000	370,000	375,000	380,000	385,000	390,000	395,000	400,000	405,000	XXXX

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